

Online Supplementary Material

Scholle SH, Asche SE, Morton S, Solberg LI, Tirodkar MA, Jaén CR. Support and strategies for change among small patient-centered medical home practices. *Ann Fam Med*. 2013;11(Suppl 1):S6-S13.

http://www.annfammed.org/content/11/Suppl_1/S6

Supplemental Appendix. Contextual Factors

Attributes, Actions, Culture, Motivations	Factors Affecting Transformation and This Study	What Others Need to Know to Transport Findings Elsewhere
Public policy	Both public- and private-sector demonstration projects have contributed to growing adoption of PCMH across the United States. PCMH is integral component of delivery system reform efforts in the Affordable Care Act. NCQA's recognition program is used by private, state, and federal initiatives in at least 31 states.	Sustainability of the PCMH depends on payers/purchasers finding value in the PCMH. Some public- and private-sector programs use their own rules or other organizations to qualify practices as PCMH.
Health care system	Small practices provide the majority of ambulatory care in the United States. There are large differences across states and regions in how practices are organized, how they relate to specialty practices, hospitals, and other health care providers and services. This study used NCQA's definition of a practice—a single geographic location where clinicians use the same records and systems. Small practices may be affiliated with larger groups.	Ownership and affiliations of small practices are changing rapidly.
Practice	Although our response rate of nearly 60% is good for a physician survey and we did not detect differences based on data available to us, respondents may have been different from nonrespondents.	Practices included in this study were among the early adopters of the PCMH. NCQA's recognition program was updated in 2011; all of these practices were recognized under the 2008 program.
Research team	NCQA, a not-for-profit organization that recognized patient-centered medical homes, is leading the research team. Research team members have substantial expertise in primary care practice redesign and evaluation.	Practices were assured that their survey results would not affect their NCQA recognition status.
Patient	Consumer and patient advocates contributed input to research design and interpretation.	We did not get sufficient data on patient populations served by practices to see how this factor might affect the findings.
Other factors from theoretical model	Resources limited us from collecting data on practice culture from multiple clinicians and staff within the practice.	Perspectives about the usefulness of training may differ among clinicians and staff.

PCMH = patient-centered medical home; NCQA = National Committee for Quality Assurance.

Key Contextual Issues

The key contextual issues for this study relate to the representativeness of the NCQA PCMH recognition program and its use in medical home demonstration programs.

Guided by input from research, advisory groups, pilot tests, and public comment, NCQA worked with these societies to develop the Physician Practice Connections–Patient-Centered Medical Home standards (PPC-PCMH) to provide a standardized tool for qualifying practices in demonstration projects evaluating the PCMH model.¹ The program was updated to include greater emphasis on patient experience, care coordination, use of performance measure results, and attention to unhealthy behaviors, mental health, and substance abuse. The standards have been endorsed by the National Quality Forum (as the Medical Home System Survey).²

As of October 31, 2012, a total of 4,937 practices in 48 states were recognized through NCQA's PCMH programs. Of the approximately 209,000 practicing primary care physicians,³ we estimate that clinicians in NCQA-recognized practices make up about 10% of practicing primary care physicians (about 2,500 of the 23,396 clinicians are nurse practitioners or physician assistants). Supplemental Appendix, Figure 1 shows the number of NCQA-recognized practices by state. Respondents in this study come from 24 states (indicated by a star in the figure).

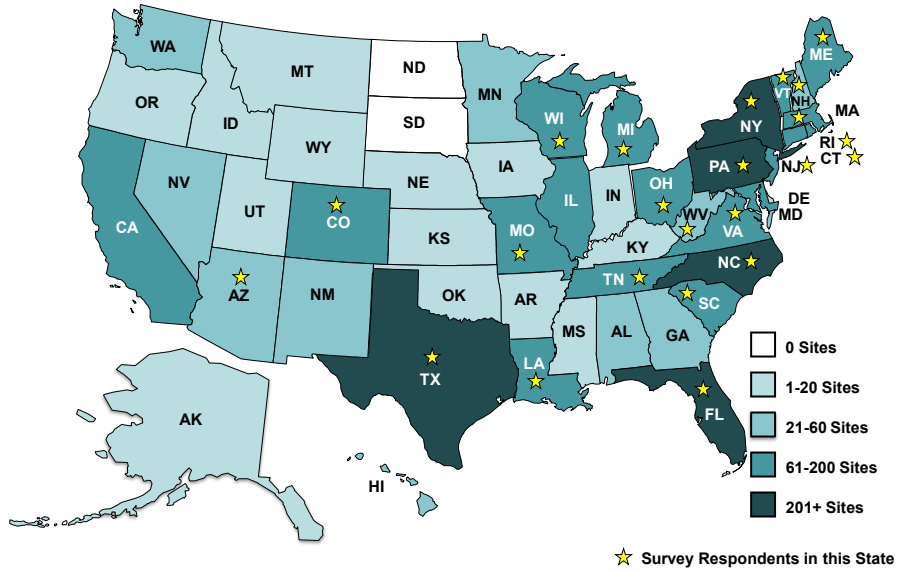
Supplemental Appendix, Figure 2 shows that demonstration programs in 31 states (including the District of Columbia) use NCQA's PCMH program. These programs include private-sector, public-sector, and multipayer initiatives. Demonstration programs vary in their design: they may offer practices help or funding to apply for recognition, and they may provide higher reimbursement or fees to practices that achieve recognition. The 24 states with private-sector initiatives represent about one-half of the 49 states where commercial health plan pilot projects are under way, and the 20 states with public-sector initiatives also represents about one-half of the 42 states that are planning or implementing medical home programs.⁴

In addition, several federal initiatives use NCQA's program. The Health Resources and Services Administration's Patient-Centered Medical Health Home Initiative supports and encourages health centers to gain recognition under the medical home program offered in partnership with NCQA. This 5-year initiative focuses on Federally Qualified Health Centers and covers recognition costs and technical assistance.⁵ More than 1,200 centers are currently enrolled. The Centers for Medicare and Medicaid Services' Advanced Primary Care Practice Demonstration also focuses on Federally Qualified Health Centers.⁶ The goal of this demonstration project is to enhance care coordination; the 500 participating centers work to obtain Level 3 recognition and receive monthly care management fees for their Medicare beneficiaries. The Military Health System is also using NCQA's recognition program among primary care practices in military treatment facilities.

References

1. National Committee for Quality Assurance. *Standards and Guidelines for the Physician Practice Connections—Patient-Centered Medical Home*. Washington, DC: National Committee for Quality Assurance; 2008.
2. National Quality Forum, Quality Positioning System. Medical Home System Survey. <http://www.qualityforum.org/qps>. Accessed Nov 22, 2012.
3. National Center for Health Statistics. *Health, United States, 2010: With Special Feature on Death and Dying*. Hyattsville, MD: National Center for Health Statistics; 2011.
4. Abrams M. The patient-centered medical care: from vision to reality. *GIH Fall Forum*. November 16, 2012.
5. Federally Qualified Health Center (FQHC) Advanced Primary Care Practice Demonstration. <http://www.innovations.cms.gov/initiatives/FQHCs/index.html>. Accessed Nov 22, 2012.
6. HRSA Patient-Centered Medical/Health Home Initiative. Program Assistance Letter 2011-01. <http://bphc.hrsa.gov/policiesregulations/policies/pal201101.html>. Accessed Nov 22, 2012.

Supplemental Appendix, Figure 1. Number of NCQA-recognized patient-centered medical home (PCMH) practices by state (as of October 31, 2012).



NCQA = National Committee for Quality Assurance.

